Eliminating Syphilis Washington, DC

Why is Syphilis Elimination in the U.S. within our reach now?

- Syphilis is a preventable and curable sexually transmitted disease (STD).
- Infectious syphilis is at the lowest rate ever reported: 2.6 cases/100,000 population (6,993 total cases).
- Syphilis is now very concentrated; half of all new cases in 1998 were reported from only 28 counties, which represent less than 1% of all U.S. counties.
- Other industrialized countries have already eliminated syphilis.

Why is it Important to Eliminate Syphilis in Washington DC?

In 1998 Washington DC ranked 16th in the nation in new cases of infectious syphilis (81 cases) and had a rate 6 times higher than the national rate.

To reduce one of the most glaring racial disparities in health

- S 84% of cases are among African Americans (79% of cases
- S The infectious syphilis rate in Washington DC for African Americans is 33 times greater than the rate for white Americans.

To decrease spread of HIV infection

Syphilis increases HIV transmission at least 2-to-5 fold.

To improve infant health

- Syphilis can be transmitted from mother to fetus during pregnancy causing stillbirths or congenital infection, some of which may result in persistent health problems.
- S In 1998, 8 cases of congenital syphilis were reported from Washington, D.C. for a rate of 95.4 cases/100,000 births, nearly 5 times higher than the national rate of 20.6

□ 0 cases reported ■ Rate > 4/100,000* ■ $Rate \le 4/100,000*$ One of 28 counties reporting half of new cases in the U.S. cases/100,000 births. * Healthy People 2000 objective is 4/100,000 1998 U.S., rate: 2.6 cases/100,000 population Washington DC Responds The D.C. Syphilis Elimination Community Coalition is composed

- of representatives from the health care sector, faith community, corrections, community-based organizations, and government agencies. The coalition will work to raise community awareness of syphilis and will guide the Bureau of STD Control's syphilis elimination activities.
- A comprehensive community needs assessment is planned for fall 1999. This needs assessment will be a collaboration between CDC and the D.C. Bureau of STD Control that will be used as another tool to guide syphilis elimination efforts.

For more information contact:

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Infectious Syphilis -District of Columbia, 1998

http://www.cdc.gov/StopSyphilis/



